



H16
8/18/03
T.M.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: 2354/110 (DJH:MG:FP18064)
In re Application of Robert Kroie		
Application Number 09/673,001 Filed April 9, 1999		
For A PAPER COATED METAL BUILDING PANEL AND COMPOSITE PANELS USING SAME		
Group Art Unit 3635		Examiner K. McDermott
Signature: <u>Ruth R. Smith</u> Name: Ruth R. Smith		

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows
(check time period desired):

- | | |
|--|-----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110) | \$ _____ |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$205/\$410) | \$ 205.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$465/\$930) | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$725/\$1450) | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$985/\$1970) | \$ _____ |

- Applicant claims small entity status.
- A check to cover the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 14-1138.
I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor

- assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- attorney or agent of record.
- attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

August 4, 2003
Date

Alice Y. Choi

Signature

Alice Y. Choi

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

<input type="checkbox"/> Total of _____ forms are submitted.
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SEND TO: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450